



## REQUEST FOR APPLICATIONS – FEDERAL FUNDS

The State of Nebraska, Department of Health and Human Services, Division of Public Health (“DHHS”) Vaccines for Children (VFC) Program, is issuing this Request for Applications (“RFA”) for the purposes of entering into grant agreement(s) (“subaward” or “subawards”) and awarding federal funds to an eligible and qualified entity to implement evidence-based activities that increase appropriate vaccination in local health departments and public clinics involved in outbreak response. A more detailed description may be found in **Project Description, Section 2**.

RFA #	RELEASE DATE
5690	January 27, 2023
APPLICATION DUE DATE	POINT OF CONTACT
MARCH 3, 2023	DHHS.Grants@nebraska.gov

INITIAL PERIOD OF PERFORMANCE	TOTAL FUNDING AVAILABLE
JULY 1, 2023	\$150,000

The resulting subaward from this RFA is subject to and shall follow federal regulation, as set forth herein. Subrecipients receiving subawards may only be paid up to the actual and allowable costs (as defined herein) of completing the **Project Description, Section 2**. No Subawards resulting from this RFA will be fee-for-service contracts, regardless of the method of payment, and no Subrecipient may keep a profit from its subaward. More detail about the terms of this funding is set forth in **Terms, Section 5**, below.

A copy of this RFA may be found online at DHHS’ website at <http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx>. Until final Subawards are signed, all other information pertinent to this RFA, including but not limited to any amendments or addenda, will be posted on the DHHS website.

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## 1. RFA OVERVIEW

### 1.1. Funding Information

Federal Agency Name	Assistance Listing Program Name	Assistance Listing Number
Centers for Disease Control	Immunization Cooperative Agreements	93.268

The total anticipated available funds for Subaward(s) under this RFA is \$150,000 [one hundred fifty thousand and 00/100 dollars]. A total award of this amount of funds is not guaranteed, but is subject to the Applications received, to actual money awarded to DHHS from the Federal Awarding Agency, and to DHHS' discretion. DHHS may establish a cap on total amount of funds that any one Applicant, or Applicants acting jointly, may request. Any cap shall be set forth in the **Applications Instructions, Section 4.4**, below. The total funds may be split among multiple Subrecipients in the discretion of DHHS.

Subawards from this RFA may also contain state funds. Any conditions imposed on the federal funds shall also apply to all state funds.

### 1.2. Period of Performance

The Period of Performance is the time during which a successful Applicant may incur costs to carry out the work authorized under this RFA and the resulting Subaward. See the definitions in 2 CFR § 200.1 or 45 CFR § 75.2. The initial Period of Performance for this RFA is from July 1, 2023, to June 30, 2024. This period may be extended by DHHS as allowable by the Federal Funding Agency. If state funds are involved in the award, this may also determine whether DHHS may extend a Period of Performance. This award has the option to be renewed for four (4) additional one (1) year periods as mutually agreed upon by the parties.

For the initial Period of Performance, all costs must be invoiced to DHHS by July 31, 2024, and liquidated (i.e., spent) by September 30, 2024. These dates are dependent on federal periods of allowability and DHHS' own ability to timely process payments. They may be subject to change; final dates will be included in the final Subaward between the parties. If an Applicant believes it cannot meet these deadlines, it should not apply for funding under this RFA. Obligation and liquidation deadlines may be extended as allowed by the Federal Funding Agency, but no extensions are guaranteed. Future Periods of Performance, as allowed by DHHS, may have different obligation and liquidation deadlines.

### 1.3. Applicable Law

Because the funds to support the activities under this RFA involve federal funds, usage of these funds is subject to federal law, in addition to any applicable state law. The Uniform Grant Guidance, [2 CFR §§ 200 et seq.](#) ("UGG") applies to subawards funded from the United States Department of Agriculture (USDA), the Department of Housing and Urban Development (HUD), the Department of Labor (DOL), the Environmental Protection Agency (EPA) or other federal agencies. The United States Department of Health and Human Services (HHS) has adopted the UGG, but has implemented and re-codified it at [45 CFR §§ 75 et seq.](#) ("HHS GG"); for awards funded by HHS, those regulations apply. Throughout this RFA, both the UGG and the HHS GG will be cited, although they are substantially similar.

The HHS GG shall apply to this RFA if it awards funds from block grants authorized by the Omnibus Budget Reconciliation Act of 1981, unless Nebraska statute or regulation has established provisions for the

payment costs and services; in all other respects, as provided herein, those block grant subawards are governed by [45 CFR §§ 96 et seq.](#)

Additional federal and state statutes and regulations may apply to the funding contained herein. These may be included in **Additional Program Requirements, Section 5.7**, below, as well as in the Subaward itself.

Further information about allowable costs and activities may be set forth herein.

#### **1.4. Award of Funding**

DHHS will evaluate Applications in the manner set forth herein. An Intent to Subaward will be posted on the DHHS Website with selected Applicants. Funds will be awarded through a written agreement, termed a Subaward, which will incorporate this RFA by reference. No promise for funds is binding on DHHS, and no funds will be paid to any Applicant until a Subaward has been executed by both the Applicant and DHHS.

In the Evaluation of Applications, DHHS shall not discriminate for or against an organization on the basis of the organization's religious character or affiliation, as consistent with 45 CFR §§ 87 et seq.

## **2. PROJECT DESCRIPTION**

### **2.1. Background and Purpose**

The Vaccines for Children program (VFC) was created as part of the Omnibus Budget Reconciliation Act of 1993. It was established following investigation of the 1989-1991 measles epidemic in the United States and was established to increase access to vaccination for children who might not get vaccinated because of financial barriers. VFC is an entitlement program required to be part of each state's Medicaid plan. The VFC program is a Title XIX Medicaid program. Section 1928 of the Social Security Act (42 U.S.C. §1396S) provides the legal authority for the VFC program by requiring each state to establish a program for pediatric vaccine distribution to registered providers. It provides authority for purchase of vaccines for administration to eligible children. CDC contracts with vaccine manufacturers to buy vaccines at a federal discount and awardees facilitate distribution to enrolled VFC providers. Children who are eligible to receive VFC vaccines are entitled to receive all vaccines recommended by the Advisory Committee on Immunization Practices (ACIP). The VFC program serves children birth through 18 years of age who meet at least one of the following criteria: American Indian or Alaska Native, Medicaid-eligible, Uninsured, or Underinsured.

The Childhood Vaccine Act (Neb. Rev. Stat. §§71-526 to 71-530) authorizes the Nebraska Department of Health and Human Services (DHHS) to assist communities in ensuring the adequacy of the immunization delivery system. State funds are used to purchase hepatitis B vaccine for universal birth-dose hepatitis B vaccination at enrolled birth dose hospitals.

DHHS, Division of Public Health is issuing this RFA for the purposes of identifying those eligible entities most qualified to successfully meet both the federal and state objective to reduce and ultimately eliminate vaccine-preventable diseases by increasing and sustaining high immunization coverage. Emphasis is placed on populations at highest risk for under-immunization and disease and those eligible for receipt of publicly purchased vaccine, especially children, at easily accessible walk-in locations.

The intent of this RFA is to reinforce the importance of a medical home while also recognizing that public clinics still provide a role to ensure access to vaccination services, especially local health departments and

public clinics involved in outbreak response. Subawards are intended to support evidence-based activities that increase appropriate vaccination.

## 2.2. Eligibility Requirements

Any Applicant for this RFA must be a “non-federal entity,” as set forth in 45 CFR § 75.2 or 2 CFR § 200.69. A “non-federal entity” is limited to local governments, Indian tribes, institutions of higher education, or nonprofit organizations: further definitions in the UGG or the HHSGG may apply. Applicants eligible to submit applications in accordance with this RFA must meet all of the below criteria as of the time of the RFA release date:

1. County or District Health Department in the State of Nebraska, or federally recognized Native American Tribal Organization; and
2. Currently enrolled VFC provider.

Priority will be given to applicants serving populations that are considered socially vulnerable. Socially vulnerable populations are especially at risk during public health emergencies because of factors like socioeconomic status, household characteristics, racial and ethnic minority status, or housing type and transportation based on the Social Vulnerability Index (SVI) scoring. The CDC/ATSDR Social Vulnerability Index (CDC/ATSDR SVI) uses 16 U.S. census variables to help local officials identify communities that may need support before, during, or after disasters. To learn more about the CDC/ATSDR Social Vulnerability Index, visit <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>.

## 2.3. Other Requirements

Applicants must be familiar with and able to meet VFC programmatic requirements as a condition of eligibility to submit an application and as a condition of receipt of subaward funds. Program Requirements and Compliance for Subaward are detailed in **Attachment A** of this RFA.

## 2.4. Project Activities

While many immunization activities will be allowed under this CDC funding source, there are certain priority activities of both the Nebraska Immunization Program and the Centers for Disease Control and Prevention (CDC). Applicants that are able to address one or more of these priority activities will be given preference.

### 2.4.1 Improve and Sustain Immunization Coverage Levels

- 2.4.1.1 Review available data sources, and develop a plan designed to improve immunization coverage levels that focuses on low or lagging vaccination coverage among children, adolescents, adults, special populations relevant to the applicant’s jurisdiction, or any combination thereof. A focus should be on identifying communities or geographic clusters with lower vaccination coverage levels or higher incidences of vaccine preventable diseases (VPDs) or both, especially within the pediatric population. A particular focus should be placed on improving vaccination coverage levels for HPV in targeted populations. A focus should also be placed on areas where Nebraska overall is lagging compared to the US and the HHS Region VII.
- 2.4.1.2 Prioritize the application of achievable activities that the enbst available evidence indicates will improve and sustain vaccination coverage levels in these areas of greater need. Include

- the rationale for choosing the priority, achievable, and affordable activities over other possible activities that may improve vaccination coverage levels.
- 2.4.1.3 Conduct, implement, and monitor the outcome of one or more of the prioritized activities.
- 2.4.2 Enhancing access to Vaccination Services
  - 2.4.2.1 Enhancing access to vaccination services to children 0 through 18 years of age in accordance with the current Advisory Committee on Immunization Practices (ACIP) immunization schedule.
- 2.4.3 Ensuring ease of access. For example, providing walk-in and nurse-only visits to serve the public.
- 2.4.4 Continuing to provide access in conjunction with Women, Infants, and Children (WIC) program settings or at minimum having a strong referral relationship with the WIC setting.
- 2.4.5 Increasing Community Demand for Vaccinations
  - 2.4.5.1 Strong bundled recommendations for on-time vaccination according to ACIP
  - 2.4.5.2 Reminder & Recall Systems
  - 2.4.5.3 Work with new and existing partners to increase demand for seasonal influenza vaccine to improve preparedness for an influenza pandemic
- 2.4.6 Provider- or System-Based Interventions
  - 2.4.6.1 Having standing orders that are updated, accessible, and utilized.
  - 2.4.6.2 Assessing the Nebraska Immunization Information System (NESIIS) as required by the VFC program and meet the requirement to report to NESIIS immunizations of patients served manually or by data exchange as noted in Attachment A Program Requirements & Compliance for Subaward.
  - 2.4.6.3 Additional priority activities with NESIIS include:
    - 2.4.6.3.1 Use NESIIS to look up prior records.
    - 2.4.6.3.2 Use NESIIS to enter in missing historical records
    - 2.4.6.3.3 Use NESIIS for provider assessment of immunization coverage
- 2.4.7 Utilizing Existing Educational Resources – Supporting Staff Education (Learning, Using, and Teaching)
  - 2.4.7.1 Accessing CDC on-line educational resources including but not limited to:
    - 2.4.7.1.1 <https://www.cdc.gov/vaccines/ed>
    - 2.4.7.1.2 You Call the Shots – Understanding the Basics – General
    - 2.4.7.1.3 You Call the Shots – Vaccine Storage and Handling
    - 2.4.7.1.4 You Call the Shots – Vaccine Administration
    - 2.4.7.1.5 You Call the Shots – Vaccines for Children
    - 2.4.7.1.6 You Call the Shots – Influenza (updates for each season)
    - 2.4.7.1.7 Epidemiology and Prevention of Vaccine-Preventable Diseases
    - 2.4.7.1.8 Can be accessed in separate webinars depending on topic desired
- 2.4.8 Accessing Immunization Action Coalition (IAC) on-line educational resources including but not limited to:
  - 2.4.8.1 [www.immunize.org](http://www.immunize.org)
  - 2.4.8.2 Clinical Tools
  - 2.4.8.3 Handouts and Staff Materials
- 2.4.9 Accessing American Cancer Society (ACS) HPV Vaccination Roundtable online educational resources including but not limited to:
  - 2.4.9.1 <http://hpvroundtable.org>
- 2.4.10 Attendance at the 21<sup>st</sup> Annual Immunize Nebraska Conference
  - 2.4.10.1 Details to be determined (TBD)
  - 2.4.10.2 [www.immunizenebraska.org](http://www.immunizenebraska.org)
  - 2.4.10.3 Generally held in Omaha with teleconference options for great distances
  - 2.4.10.4 Generally held in May or June annually
- 2.4.11 Participate in and complete one Immunization Quality Improvement for Providers (IQIP) cycle, with a focus on providing immunizations for both adolescents and children on time.



- 2.4.11.1 Define vaccine workflow to identify areas of possible improvement based on chosen strategies.
- 2.4.11.2 Follow up phone calls at 2 and 6 months from the initial visit to monitor progress and or implement changes.
- 2.4.11.3 Follow up phone call 12 months from the initial visit to evaluate progress and finalize IQIP cycle.

## 2.5. Funding Requirements

The use of subaward funds is limited to actual, allowable, allocable, and reasonable costs in compliance with all applicable law including but not limited to of 45 CFR §§ 75 et seq., the PHS Grants Policy Statement 9505 and identified program priorities and restrictions. As consistent with 45 CFR §§ 75 et seq., indirect costs may be paid through either a federally approved rate, a rate previously approved by DHHS, or, if the applicant has never had a federally approved rate, through a de minimis rate.

DHHS reserves the right to restrict the number of awards based on the funding available and program resources available for subaward administration and subrecipient monitoring.

Applicants may apply for less funding and should only apply for needed funding. Applicants are required to have other sources of immunization program funding. Applicants are expected by CDC and the Nebraska Immunization Program to consider other sources of additional program income, such as Medicaid administration fee billing. Any program income generated from this specific RFA and subsequent subaward must be used to offset immunization program costs.

For further requirements, please see **Attachment A. Program Requirements & Compliance for Subaward.**

## 2.6. Reporting Requirements

Successful applicants must be familiar with and able to meet the project reporting requirements as a condition of receipt of subaward. Reporting Requirements for the Nebraska Department of Health and Human Services Immunization Program are detailed in **Attachment B Subaward Reporting Requirements for Award** of this RFA and **Attachment G, Work Plan Example.**

## 2.7. Other Requirements

Applicants are to describe if they are one of the four federally recognized tribes headquartered in Nebraska. Applicants are to clearly justify their proposed funding amount.

Applicants may provide references or letters confirming commitments from third parties that will be contributing a portion of cost sharing.

Successful applicants must submit a W-9 form prior to award.

## 2.8. Applicable Attachments

1. **Attachment A.** *Program Requirements & Compliance for Subaward*
2. **Attachment B.** *Subaward Reporting Requirements for Award*
3. **Attachment C.** *Line Item Budget Worksheet Example*
4. **Attachment D.** *Budget Expense Report Example*
5. **Attachment E.** *Personnel Cost Worksheet Example*
6. **Attachment F.** *De Minimis Calculator Example*
7. **Attachment G.** *Work Plan Example*



8. **Attachment H.** *End User Guidance: Shared File Link*

### 3. RFA PROCEDURE

This RFA seeks Applications to complete activities allowable under the funding source identified in 1.2, above. All Applications must conform to all instructions, conditions, and requirements included in this RFA. Applicants should carefully examine this RFA, as well as the requirements on the state or federal funds involved. Applications that DHHS determines do not conform to the requirements of this RFA, or Applications from ineligible entities, may be considered non-responsive and rejected without scoring.

#### 3.1. RFA Point of Contact (“POC”)

Office of Procurement and Grants  
PO Box 94926  
Lincoln, NE 68508  
[DHHS.Grants@nebraska.gov](mailto:DHHS.Grants@nebraska.gov)

From the date the RFA is issued until the Intent to Subaward is issued, communication from the Applicant or prospective Applicant is limited to the POC listed above (but see exceptions, below). After the Intent to Subaward is issued, the Applicant may communicate with individuals DHHS has designated as responsible for negotiating the Subaward on behalf of DHHS. No member of the state government, employee of the state, or member of the Evaluation Committee is empowered to make binding statements regarding this RFA. The POC will issue any clarifications or opinions regarding this RFA in writing. Only the POC has the authority modify the RFA, answer questions, or render opinions on behalf of DHHS. Applicants shall not have any communication with or attempt to communicate or influence any Evaluator.

The following exceptions to these restrictions are permitted:

1. The electronic submission of the Application to the address designated in **Submission of Applications, Section 3.5.**
2. Contact made pursuant to pre-existing contracts, subawards, or obligations.
3. Contact required by the schedule of events, or an event scheduled later by the RFA POC; and
4. Contact required for negotiation and execution of the final subaward.

DHHS reserves the right to reject an Applicant’s application, withdraw an Intent to Subaward, or terminate a Subaward if DHHS determines there has been a violation of these procedures.

#### 3.2. Schedule of Events

ACTIVITY		DATE/TIME
1.	Release RFA	January 27 <sup>th</sup> , 2023
2.	Last day to submit written questions	February 10 <sup>th</sup> , 2023
3.	State responds to written questions through RFA “Addendum” and/or “Amendment” to be posted to the Internet at: <a href="http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx">http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx</a>	February 17 <sup>th</sup> , 2023
4.	Application Review Period Begins (Application due date)	March 3 <sup>rd</sup> , 2023
5.	Evaluation Period	March 3 <sup>rd</sup> , 2023, to March 31 <sup>st</sup> , 2023
6.	Post “Intent to Subaward” to Internet at: <a href="http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx">http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx</a>	April 19 <sup>th</sup> , 2023
7.	Period of Performance Start*	July 1 <sup>st</sup> , 2023

*\*The Period of Performance start may occur before a Subaward is finalized, agreed to, and executed by the parties. Because this is just the period during which costs are allowable, it does not reflect that any agreement between DHHS and any successful Applicant has gone into effect or is binding in any way. No binding agreement has been made between DHHS and any Applicant until a Subaward is fully executed by both parties.*

### 3.3. Written Questions and Answers

Questions regarding information needed for an Application, as well as the meaning or interpretation of any RFA provision, must be submitted in writing to POC via email and clearly marked “RFA Number 5690; Questions.” The POC is not obligated to respond to questions that are received late, as set forth in the Schedule of Events.

Applicants should present, as questions, any assumptions upon which the Application is or might be developed. Applications will be evaluated without consideration of any known or unknown assumptions of an Applicant. The Subaward will not incorporate any known or unknown assumptions of an Applicant.

Questions must be sent via e-mail to **DHHS.Grants@nebraska.gov**. DHHS recommends that Applicants submit questions using the following format:

RFA Section Reference	RFA Page Number	Question

Written answers will be posted at the DHHS Website per the Schedule of Events. Written answers will become part of this RFA.

### 3.4. Submission of Applications

DHHS is accepting either electronically submitted responses or hard copy, paper responses for this funding opportunity. **There is a limit of one application per agency.** Applicants must submit a complete Application, including all the parts required herein, in one of two ways:

1. Electronic Response:

Applicants submitting electronically can upload the response via ShareFile here:

ShareFile link

<https://nebraska.sharefile.com/r-r41520c30d9764445991442f512ba5e25>

Applicants should reference **Attachment H: End User Guidance: Shared File Link** for more information regarding ShareFile.

The submission shall include the Application as a single Portable Document Format (PDF) or multiple PDFs. Failure to provide the Application in the correct format may result in DHHS being unable to read or open the Application and thus rejecting it without Evaluation.

The applicant should clearly identify the uploaded response files. To assist in identification please use the following naming convention: RFA5690 ABC Company

If multiple files are submitted for one funding opportunity, add number of files to file names: RFA5690 ABC Company File 1 of 2.

If multiple responses are received, DHHS will retain only the most recently submitted response. It is the applicant's responsibility to submit the response by the date and time indicated in the Schedule of Events. Electronic responses must be received by DHHS by the date and time of the due date per the Schedule of Events. No late responses will be accepted.

## 2. Physical Mailing Response:

Option 1. Submission directly to the POC via United States Postal Service mail. The Application shall be sent to the POC's address listed above in **Point of Contact, Section 3.1**. The Application itself shall remain sealed and shall not be opened until the beginning of the Application Review Period.

Option 2. Hand delivered responses or responses delivered by FedEx or UPS should be delivered to:

ATTN: Office of Procurement and Grants  
DHHS - 3rd Floor Reception Desk  
301 Centennial Mall South  
Lincoln, NE 68509

The Application itself shall remain sealed and shall not be opened until the beginning of the Application Review Period.

Regardless of submission method, Applicants must use the forms supplied by DHHS in this RFA unless specifically otherwise indicated herein. All Applications must be received by the beginning of the Application Review Period, as stated in the **Schedule of Events, Section 3.2**.

## 3.5. Evaluation Committee

Applications are evaluated by members of an Evaluation Committee(s). The Evaluation Committee(s) will consist of individuals selected at the discretion of DHHS. All members of the Evaluation Committee will disclose to DHHS any potential conflicts of interest before evaluation. Members with a conflict will be removed from the Evaluation Committee before scoring.

Any contact, attempted contact, or attempt to influence an evaluator that is involved with this RFA may result in the rejection of this Application and further administrative actions.

### 3.6. Evaluation of Applications

All complete Applications that are responsive to the RFA will be evaluated. DHHS reserves the right to evaluate Applicants and award funds in a manner utilizing criteria selected at DHHS' discretion and in the best interest of meeting the objectives of the funding involved. The Evaluation will be conducted by the following method:

DHHS will initially evaluate all Applications to determine whether the Applicant is an eligible entity; whether the Application meets the minimum requirements of this RFA; and whether the Applicant poses risk of noncompliance with federal statutes, regulations, and the terms and conditions of the Subaward, such that DHHS should not award funding. DHHS will award to the top scoring Applicant or Applicants, as DHHS determines and as funding allows. DHHS will conduct a fair, impartial, and comprehensive evaluation of all Applications in accordance with the predetermined criteria based on the Application. The Applicant's responses to the Forms will be scored through a point method set forth below. DHHS will evaluate on the following categories with a maximum point potential for each:

1. **Applicant's Organizational Overview.**

Applicants will receive high scores if they have a defined and clear organizational structure; organizational experience in federal grants; qualified and capable personnel with experience in federal grants or equivalent credentials or experience; or can otherwise demonstrate that they will be a reliable subrecipient who will use all awarded funds in a manner consistent with law and the requirements of this RFA.

As part of the scoring and selection process, DHHS will assess an entity's capacity to meet federal, state, and programmatic requirements, provide adequate immunization services to eligible persons to meet identified needs, and submit timely and accurate reports, invoices and fiscal documentation. DHHS reserves the right to consider an entity's performance in current and/or prior grants, subawards, contracts, or cooperative agreements with DHHS or other State of Nebraska agencies. **(50 points)**

2. **Applicant's Work Plan.**

Applicants will receive higher scores if their work plan responds to the Project Description and meets the goals or objectives of the federal funding and RFA, as well as evidencing the ability to meet expected outcomes, adhere to reporting deadlines or other deadlines, and complete any required evaluation activities. DHHS exercises sole discretion as to whether the Application adequately addresses the purposes and objectives of the federal funding DHHS has received. **(100 points)**

3. **Applicant's Budget.**

Applicants will receive higher scores if the budget is tailored to the work plan and utilizes allowable direct and indirect costs. Total request for funding itself will not determine score; rather, Applicants will be scored based on whether budget accurately reflects allowable costs of completing the work set forth in the work plan. **(25 points)**

4. **Bonus Points.** Applicants will receive bonus points added to their total scores based on the average of the overall CDC/ATSDR Social Vulnerability Index (SVI) score for all counties served by the project. Bonus points will not result in applications that exceed the total points available for Applications under this RFA.

Overall SVI Score	Bonus Points
No SVI counties served	0
greater than 0 but less than or equal to 0.1	10
greater than 0.1 but less than or equal to 0.2	20

greater than 0.2 but less than or equal to 0.3	30
greater than 0.3	40

There are 175 total points available for Applications under this RFA. Cost sharing percentages will be used to break ties among applications with equivalent scores after evaluation against all other factors

DHHS may award to a single top Applicant, or may award to multiple top scoring Applicants, in its sole discretion. If all Applicants meet the minimum requirements and are meritorious, DHHS may also elect to award to all Applicants.

### **3.7. Late Applications**

Applications received after the time and date of the Application opening will be considered late Applications. Late Applications will be rejected. All Applications must be electronically or physically received by the date and time of the Application Opening. The State is not responsible for Applications that are late or lost regardless of cause or fault. It is the Applicant's responsibility to ensure Applications are received timely.

### **3.8. Corrections**

An Applicant may correct a mistake in an Application prior to the time of opening by giving written notice to the POC of intent to withdraw the Application for modification, or to withdraw the Application completely. Changes in an Application after the Evaluation Period has begun are acceptable only if the change is made to correct a minor error. Whether an error is minor shall be determined by DHHS.

### **3.9. Grievance and Protest Procedures**

All grievances must follow the DHHS Subaward Grievance/Protests Procedures, available on the DHHS website. Grievances must be filed timely.

### **3.10. DHHS Reservations of Authority During Application and Evaluation Process**

After Evaluation of the Applications, or at any point in the RFA process, DHHS may take one or more of the following actions:

1. Amend the RFA;
2. Extend the time of or establish a new Application opening time (i.e., allowing additional time to submit Applications);
3. Waive deviations or errors in the RFA process and in Applications that are not material, do not compromise the RFA process or an Application, and do not improve an Applicant's position;
4. Accept or reject a portion of or all of an Application;
5. Accept or reject all Applications;
6. Withdraw the RFA; or
7. Elect to reissue the RFA.

DHHS reserves the right to adjust the Applicant's budget with successful Applicants after the Intent to Subaward is issued. DHHS also reserves the right to adjust the Work Plan with Applicant to meet the requirements of the grant, Federal Funding Agency, law, or to meet DHHS programmatic needs. DHHS also reserve the right to apply additional conditions based on the successful Application and the result of a pre-award risk assessment. If a scoring method is used to rank applications to determine funding amounts, all adjustments shall have no bearing on rank

If DHHS rejects all Applications, it may enter either reissue an RFA with the same or different specifications and terms, or it may negotiate a single or multiple Subawards with individual Applicants or non-Applicants.

## 4. APPLICATION INSTRUCTIONS

### 4.1. Application Contents

A complete, responsive Application must contain the following completed documents:

1. Form 1 – Application Form and Cover Sheet
2. Form 2 – Organization Overview
3. Form 3 – Applicant's Work Plan
4. Form 4 – Applicant Budget

Applications that do not contain all of the required sections will be rejected. An editable Microsoft Word-formatted document of the Forms will be posted on the DHHS Website, which Applicants may fill in and submit.

### 4.2. Applicant's Organizational Overview

The Applicant's Organization Overview section shall contain the following information about the Applicant. If the Application is a cooperative or joint venture between two or more entities, all information required in this section shall be provided for all entities, even if a new legal entity has been created or is planned to be created for the purposes of the Subaward.

1. **Organization Information.** Applicant's full legal name, including any other "doing business as" names, or any previous names the organization used. A UEI number shall be provided. A parent UEI number shall also be provided, if applicable.
2. **Summary of Federal Grants Experience.** A description of Applicant's previous experience with receiving federal funds. This shall include, but not be limited to, experience receiving federal funds as a recipient or a subrecipient. Applicant should describe and demonstrate knowledge of the Uniform Grant Guidance / HHS Grants Guidance (as applicable), as well as any specific experience with the particular federal program and funding source that funds this RFA.
3. **Summary of Programmatic Experience.** A description of Applicant's experience with the type of programming or work contained in the Project Description, or other relevant work.
4. **Personnel and Management.** Applicant should identify individuals employed by Applicant, on its board of directors, or otherwise affiliated with Applicant, who have a demonstrated knowledge or experience with federal grants, the Uniform Grant Guidance or the HHS Grants Guidance, programmatic experience, or other relevant experience.
5. **Agreements Terminated or Costs Disallowed.** Applicant must provide a summary of any agreements executed within the last five (5) years with federal awarding agencies or pass-through entities (either as grant agreements, cooperative agreements, subawards, or contracts) that:
  - Were terminated for cause; or
  - Where Specific Conditions were placed on Applicant (see 2 CFR § 200.208 or 45 CFR § 75.207).

If an Applicant has been disbarred by the United States Federal government, it is not eligible to receive funding under this RFA.

### 6. Community-Level Needs Assessment

Applicants are to summarize a recent (generally within the last 5 years) community-level needs assessment. The summary should clearly describe how the assessment is congruent with the purpose of this RFA. A community-level needs assessment may have been carried out in a variety of ways, either by the applicant, or by other entities. Characteristics of or formats for a community level needs assessments vary, but can usually be defined as the collection, analysis, interpretation and presentation of information about health conditions,



risks and assets in a community related to the health of the population; and the identification and prioritization of problems to be considered for action by the community.

The summary should include the defined community (e.g. counties / area included), population (e.g. number, ages, refugees, migrant workers, minority population), population disparities, a brief description of the current immunization infrastructure and services in the area including geographic overlap between public providers, and lack of services or barriers to services for populations in relation to the purpose of this RFA.

**7. Applicants Existing Immunization Program Activities**

Applicants are to describe their current immunization activities, ease of access and steps to obtain services, vaccines provided throughout the lifespan, counties or area served including known geographic overlap, populations served, and details regarding requests for donations and/or Medicaid billing for vaccine administration fees.

Applicants are to provide the number of public immunizations given (VFC and VFA) from 7/1/2021 – 6/30/2022. This number will be compared to the report from the Nebraska Immunization Information System (NESIIS) from which reporting public doses administered is a program requirement.

Applicants are to describe how the receipt of subaward funds will expand or enhance their existing immunization program activities.

**8. Selected Target Population(s) and Priorities**

Applicants are to describe the selection of the target population(s) and the priorities that should be based on the community-level needs assessment leading to a planning process that identified needs and desired outcomes congruent with the purpose of the RFA and priority activities of the Nebraska Immunization Program and Centers for Disease Control and Prevention (CDC).

**9. Goals and Desired Outcomes**

Applicants are to describe goals and desired outcomes. Applicants should provide enough detail about the chosen goals and desired outcomes to understand what impact the proposed project / work plan is intended to have. The goals and desired outcomes should be based on, and relevant to, the community-level needs assessment, selected target populations(s), the purpose of the RFA, and selected Nebraska Immunization Program and CDC priorities.

**10. Methodology in Selection of Activities to Achieve Goals and Outcomes**

Applicants are to describe their methodology and considerations used in planning the key steps and actions or activities necessary for the proposed project / work plan. Applicants are to cite evidenced based resources if used.

**11. Evaluation Plan**

Applicants are to describe their method to evaluate if the project / work plan is operating as intended.

**12. Human Resource Capacity**

Applicants are to describe how well equipped their human resource capacity, (e.g. the roles, qualifications, and time allotted for personnel) to perform duties related to the work plan activities.

**13. Organization Capacity**

Applicants are to describe how well they can reasonably safeguard assets, retain and monitor personnel, and engage community partners as needed for the proposed project / work plan.

**14. Fiscal and Program Management Resources**



Applicants are to describe how well they can provide reasonable assurance for successful grant implementation and reporting.

#### **4.3. Applicant's Work Plan**

The Work Plan must respond in detail to the Project Description. It must contain a description of the work activities Applicant is proposing to complete under the RFA. It should contain an understanding of the requirements for the project under the applicable federal or state funding sources (or both), and, as applicable, descriptions of timelines, outcome/process measures, and program evaluation activities. See **Attachment G. Work Plan Example**.

##### **1. Project Work Plan**

Applicants are to include a Work Plan that reflects the goals and desired outcomes, methodology, and evaluation plan from the Narrative.

##### **2. Evidence – Based Activities & Priority Activities**

The degree to which applicants have included evidence-based activities and a Work Plan that is congruent with the Nebraska Immunization Program and CDC priorities will be considered for preference. Applicants are to cite evidence-based resources if used either in the Narrative or Work Plan or both.

##### **3. Objective(s), Activities, and Evaluation Measure Alignment**

Applicants are to include Work Plan objective(s) that provide a means to measure while balancing resources to implement activities within the timeline. The degree to which objectives are SMART (specific, measurable, achievable, realistic, and time framed) will be considered for preference.

The degree to which activities and subsequent evaluation / performance measures are selected that will help the Applicant monitor and identify progress towards goal(s) completion and desired outcomes will be considered for preference. Applicants are to include a Work Plan that is realistic and suited for a 12 month project period. The proposed work plan, if approved, will be the basis to correspond to the required subsequent quarterly reports.

#### **4.4. Applicant's Budget**

Each budget should contain only costs that are allowable under the applicable federal statutes, regulations, terms, and conditions of this RFA. Applicants will not be allowed to change their budgets once submitted to DHHS, unless the POC specifically requests, in writing, budget changes. Budgets may be modified as required by DHHS or in agreement between DHHS and the Applicant after the Intent to Subaward is announced. Applicants should not rely on budget changes or modifications in submitting their proposed budget but should be able to perform the program activities consistent with their budget.

If an Applicant has or has prepared a cost allocation plan for this subaward, it may submit it along with the Application.

If Applicants plan to charge indirect costs other than through a cost allocation plan, Applicants thus must provide one of the following along with their budget: 1) A current federally approved indirect cost rate agreement; 2) A currently approved indirect cost rate agreement with DHHS; or 3) A calculation of *de minimis* indirect costs consistent with federal rules. DHHS may provide a calculator to aid programs in calculating *de minimis* indirect costs, upon request.

Indirect costs and cost allocation plans may also be negotiated after the Intent to Subaward. As consistent with law, Applicants may voluntarily opt to take a lower indirect rate than their approved agreement, or indirect cost calculation, allows.

Applicants may apply for up to \$25,000 in funding.

**1. Allowable, Allocable, and Reasonable Costs**

Applicants are to include a Line Item Budget Worksheet (**Attachment C. Line Item Budget Worksheet Example**), Budget Narrative / Justification, Personnel Cost Worksheet (**Attachment E. Personnel Cost Worksheet Example**) or equivalent, and Indirect Cost Rate Agreement or De Minimis calculation (**Attachment F. De Minimis Calculator Example**) if requesting indirect cost; these items are collectively referred to as the overall Budget. These items should clearly demonstrate allowable, allocable, and reasonable costs in compliance with all applicable law and federal guidance, including but not limited to 45 CFR §§ 75 et seq., and identified program priorities and restrictions. Applicants are to submit the overall budget items that demonstrate an understanding of the administrative requirements of federal financial assistance.

The Budget should be thorough and clear enough to provide confidence that the proposed costs are relevant to the Work Plan.

**2. Total Program Budget**

Applicants are to include a Total Program Budget that outlines the budget for the subaward, anticipated program income, and other support for a Total Program Budget as outlined in detail on **Attachment C. Line Item Budget Worksheet Example**.

## **5. TERMS**

Applicants must be aware of the following terms when submitting their Applications. These terms will be included in the resulting Subaward between the parties, as well.

### **5.1. Addenda**

The following Addenda will be incorporated into any Subaward with a selected Applicant. They are available online at the DHHS Website <https://dhhs.ne.gov/Pages/Grant-Opportunities.aspx>:

**Addendum A - DHHS Standard Terms – Subawards**

**Addendum B - DHHS Insurance Requirements – Subawards**

**Addendum C - DHHS Business Associate Agreement Provisions**, if applicable

DHHS reserves the right to amend these terms at any time during the RFA; to negotiate the terms with selected Applicants; to amend or change these terms for any subsequent Subaward signed and executed by the parties; or any combination of the above. Terms required by federal, or state law will not be negotiated, and if an Applicant cannot agree to these terms, DHHS may withdraw or modify the Intent to Subaward and take any of the actions set forth herein.

### **5.2. Budget Changes**

The final Subaward may contain terms to allow a Subrecipient to modify a budget, with or without approval from DHHS. Applicants should not, however, rely on this when submitting budgets.

### **5.3. Direct Costs**

Under this Subaward, DHHS shall only pay for actual and allowable costs (as defined in this section) incurred during the Period of Performance.

To be allowable, all costs must be:

- Necessary for the performance of the Subaward activities;
- Reasonable, as provided in 2 CFR § 200.404 or 45 CFR § 75.404;
- Allocable to the federal award, as provided in 2 CFR § 200.405 or 45 CFR § 75.405;
- Consistent with all other requirements of the Cost Principles in 2 CFR § 200 Subpart E or 45 CFR § 75 Subpart E; and
- Consistent with all other law, regulation, policy, or other requirements applicable to the state or federal funds involved.

To be actual, all costs must be finalized and spent by the appropriate dates set forth in the Subaward.

Particular Federal Funding Agencies may have additional requirements and stipulations regarding allowable costs under that particular funding.

Applicants should be aware that direct personnel costs must be consistent with 45 CFR § 75.430 or 2 CFR § 200.430, as applicable. These costs must be able to be backed by sufficient documentation, or must be shown to be allocable to the award via an alternative, allowable method, such as a random moment time study.

#### **5.4. Indirect Costs**

Federal law defines indirect costs as “costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved.” 2 CFR § 200.1 and 45 CFR § 75.2. All indirect costs may only be paid if they are consistent with the UGG or HHS GG, as applicable.

As provided in 2 CFR § 200.414 and 45 CFR § 75.414, indirect costs may only be paid from a federal grant if paid through a federally-approved rate or a rate negotiated between DHHS and the Applicant. If the Applicant has never had a federally-approved indirect rate, it may charge indirect costs as consistent with the federal rules for *de minimis* indirect costs.

Cost Allocation plans may set forth a direct allocation of all costs under a subaward, or may allocate only a portion of those costs along with an indirect rate. Subrecipients may not, however, charge items as direct costs and also as indirect costs.

#### **5.5. Program Income**

Any revenue generated by the Subaward is Program Income (see definition in 2 CFR § 200.1 or 45 CFR § 75.2). Program Income requires an accounting of its use and must be handled in accordance with 2 CFR § 200.307 or 45 CFR § 75.307. As per the Notice of Award for the federal funds involved in this RFA or from other regulation, all program income generated by the Subawards awarded as a result of this RFA must be handled under the addition method, Please see the regulations cited above for more detail.

#### **5.6. Additional Program Requirements**

This RFA and any resulting Subaward will be subject to the HHS Grants Policy Statement. A copy of it is available here: <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>

## 6. GLOSSARY OF TERMS

*All terms shall have the meaning as set forth in 2 CFR §§ 200 et seq. or 45 CFR §§ 75 et seq. unless otherwise specifically set forth herein.*

**Agent/Representative:** A person authorized to act on behalf of another.

**Amend:** To alter or change by adding, subtracting, or substituting.

**Amendment:** A written correction or alteration to a document.

**Applicant:** Non-Federal Entity that has applied for funding under this RFA.

**Application:** The written proposal submitted by the Applicant applying for funding under this RFA, which is composed of Forms 1 through 4.

**Application Due Date:** The date the RFA must be submitted to DHHS, and if not submitted by that time, rejected.

**DHHS Website:** [www.dhhs.ne.gov](http://www.dhhs.ne.gov).

**Evaluation:** The process of examining an Applicant after opening to determine the Applicant's responsibility, responsiveness to requirements, and to ascertain other characteristics of the Application that relate to determination of the successful award.

**Evaluation Committee:** Committee(s) appointed by DHHS that advises and assists DHHS in the evaluation of Applications.

**Evaluator:** An individual on the Evaluation Committee who advises and assists in the evaluation of Applications.

**HHS Grants Guidance ("HHSGG"):** The regulations codified at 45 CFR §§ 75 et seq., a re-codified version of the UGG, which provide the general administrative requirements for grant funding flowing down from the federal Department of Health and Human Services. See also Uniform Grant Guidance.

**Intent to Subaward:** A document noting the results of the RFA evaluation process, and identified any identified Applicant(s) with whom DHHS intends to award federal funds, but not a binding agreement with any promise to award.

**Mandatory/Must:** Required, compulsory, or obligatory.

**May:** Discretionary, permitted; used to express possibility.

**Must:** See Mandatory/Must and Shall/Will/Must.

**Non-Responsive:** When an Application does not meet the minimum requirements of this RFA.

**Point of Contact ("POC"):** The person designated to receive communications and to communicate.

**Request for Applications ("RFA"):** Written solicitation of competitive applications for federal grant funding.

**Shall/Will/Must:** An order/command; mandatory.

**Should:** Expected; suggested, but not necessarily mandatory.

**Subaward:** In addition to the definition in 2 CFR § 200.1 and 45 CFR § 75.2, Subaward means the Grant Agreement executed, pursuant to the terms of the RFA, with the Non-Federal Entity.

**Subrecipient:** In addition to the definition in 2 CFR § 200.1 and 45 CFR § 75.2, Subrecipient means the Non-Federal Entity that has executed a Subaward with DHHS.

**Uniform Grants Guidance (“UGG”):** The regulations codified at 2 CFR §§ 200 et seq., which provide the general administrative requirements for grant funding flowing down from the federal government. See also HHS Grants Guidance.

**Will:** See Shall/Will/Must.

## FORM 1 – APPLICATION COVER SHEET

**Instructions:** This form must be signed and returned, along with the application materials, before the Application Due Date, to the POC or designated email address, as applicable.

RFA #	RELEASE DATE
5690	January 27, 2023
APPLICATION DUE DATE	POINT OF CONTACT
MARCH 3, 2023	DHHS.Grants@nebraska.gov

### CERTIFICATION AND GUARANTEE OF COMPLIANCE

By signing this Application Cover Sheet, the Applicant guarantees compliance with the provisions stated in this Request for Application and certifies that all information contained in this Application is accurate. This Application is submitted pursuant to the terms of the RFA, and if the Applicant is awarded funding, it will be incorporated into the Subaward between the parties. I understand that if anything in this Application conflicts with the RFA or with the subsequent Subaward, the Subaward and RFA shall govern as set forth in the Subaward.

ORGANIZATION\*:

\_\_\_\_\_

ORGANIZATION UEI NUMBER: \_\_\_\_\_ PARENT UEI (IF APPLICABLE): \_\_\_\_\_

COMPLETE ADDRESS: \_\_\_\_\_

\_\_\_\_\_

CONGRESSIONAL DISTRICT: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

\_\_\_\_ I CERTIFY THAT THIS ORGANIZATION IS AN "ELIGIBLE ORGANIZATION" AS DEFINED BY THIS RFA.

\_\_\_\_ I CERTIFY THAT THIS ORGANIZATION IS NOT PRESENTLY DEBARRED OR SUSPENDED.

SIGNATURE: \_\_\_\_\_

TYPED NAME & TITLE OF SIGNER: \_\_\_\_\_

*\*Name must match UEI Number.*

## FORM 2 – APPLICANT’S ORGANIZATION

The Applicant’s Organization Overview section shall contain the following information about the Applicant. If the Application is a cooperative or joint venture between two or more entities, all information required in this section shall be provided for all entities, even if a new legal entity has been created or is planned to be created for the purposes of the Subaward.

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**Summary of Federal Grants Experience.** A description of Applicant’s previous experience with receiving federal funds. This shall include, but not be limited to, experience receiving federal funds as a recipient or a subrecipient. Applicant should describe and demonstrate knowledge of the Uniform Grant Guidance / HHS Grants Guidance (as applicable), as well as any specific experience with the particular federal program and funding source that funds this RFA.

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**Personnel and Management.** Applicant should identify individuals employed by Applicant, on its board of directors, or otherwise affiliated with Applicant, who have a demonstrated knowledge or experience with federal grants, the Uniform Grant Guidance or the HHS Grants Guidance, programmatic experience, or other relevant experience.

**Agreements Terminated or Costs Disallowed.** Applicant must provide a summary of any agreements executed within the last five (5) years with federal awarding agencies or pass-through entities (either as grant agreements, cooperative agreements, subawards, or contracts) that:

- Were terminated for cause; or
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### Community-Level Needs Assessment

Applicants are to summarize a recent (generally within the last 5 years) community-level needs assessment. The summary should clearly describe how the assessment is congruent with the purpose of this RFA. A community-level needs assessment may have been carried out in a variety of ways, either by the applicant, or by other entities. Characteristics of or formats for a community level needs assessments vary, but can usually be defined as the collection, analysis, interpretation, and presentation of information about health conditions, risks and assets in a community related to the health of the population; and the identification and prioritization of problems to be considered for action by the community.

The summary should include the defined community (e.g., counties / area included), population (e.g., number, ages, refugees, migrant workers, minority population), population disparities, a brief description of the current immunization infrastructure and services in the area including geographic overlap between public providers and lack of services or barriers to services for populations in relation to the purpose of this RFA.



**Applicants Existing Immunization Program Activities**

Applicants are to describe their current immunization activities, ease of access and steps to obtain services, vaccines provided throughout the lifespan, counties or area served including known geographic overlap, populations served, and details regarding requests for donations and/or Medicaid billing for vaccine administration fees.

Applicants are to provide the number of public immunizations given (VFC and VFA) from 7/1/2021 – 6/30/2022. This number will be compared to the report from the Nebraska Immunization Information System (NESIIS) from which reporting public doses administered is a program requirement.

Applicants are to describe how the receipt of subaward funds will expand or enhance their existing immunization program activities.

**Selected Target Population(s) and Priorities**

Applicants are to describe the selection of the target population(s) and the priorities that should be based on the community-level needs assessment leading to a planning process that identified needs and desired outcomes congruent with the purpose of the RFA and priority activities of the Nebraska Immunization Program and Centers for Disease Control and Prevention (CDC).

**Goals and Desired Outcomes**

Applicants are to describe goals and desired outcomes. Applicants should provide enough detail about the chosen goals and desired outcomes to understand what impact the proposed project / work plan is intended to have. The goals and desired outcomes should be based on, and relevant to, the community-level needs assessment, selected target populations(s), the purpose of the RFA, and selected Nebraska Immunization Program and CDC priorities.

**Methodology in Selection of Activities to Achieve Goals and Outcomes**

Applicants are to describe their methodology and considerations used in planning the key steps and actions or activities necessary for the proposed project / work plan. Applicants are to cite evidenced based resources if used.

**Evaluation Plan**

Applicants are to describe their method to evaluate if the project / work plan is operating as intended.

**Human Resource Capacity**

Applicants are to describe how well equipped their human resource capacity, (e.g., the roles, qualifications, and time allotted for personnel) to perform duties related to the work plan activities.

**Organization Capacity**

Applicants are to describe how well they can reasonably safeguard assets, retain, and monitor personnel, and engage community partners as needed for the proposed project / work plan.

**Fiscal and Program Management Resources**

Applicants are to describe how well they can provide reasonable assurance for successful grant implementation and reporting.

## FORM 3 – APPLICANT’S WORK PLAN

The Work Plan must respond in detail to the Project Description. It must contain a description of the work activities Applicant is proposing to complete under the RFA. It should contain an understanding of the requirements for the project under the applicable federal or state funding sources (or both), and, as applicable, descriptions of timelines, outcome/process measures, and program evaluation activities. See **Attachment G. Work Plan Example**.

### **Project Work Plan**

Applicants are to include a Work Plan that reflects the goals and desired outcomes, methodology, and evaluation plan from the Narrative.

### **Evidence – Based Activities & Priority Activities**

The degree to which applicants have included evidence-based activities and a Work Plan that is congruent with the Nebraska Immunization Program and CDC priorities will be considered for preference. Applicants are to cite evidence-based resources if used either in the Narrative or Work Plan or both.

### **Objective(s), Activities, and Evaluation Measure Alignment**

Applicants are to include Work Plan objective(s) that provide a means to measure while balancing resources to implement activities within the timeline. The degree to which objectives are SMART (specific, measurable, achievable, realistic, and time framed) will be considered for preference.

The degree to which activities and subsequent evaluation / performance measures are selected that will help the Applicant monitor and identify progress towards goal(s) completion and desired outcomes will be considered for preference. Applicants are to include a Work Plan that is realistic and suited for a 12 month project period. The proposed work plan, if approved, will be the basis to correspond to the required subsequent quarterly reports.

## FORM 4 – APPLICANT’S BUDGET

Each budget should contain only costs that are allowable under the applicable federal statutes, regulations, terms, and conditions of this RFA. Applicants will not be allowed to change their budgets once submitted to DHHS, unless the POC specifically requests, in writing, budget changes. Budgets may be modified as required by DHHS or in agreement between DHHS and the Applicant after the Intent to Subaward is announced. Applicants should not rely on budget changes or modifications in submitting their proposed budget but should be able to perform the program activities consistent with their budget.

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If Applicants plan to charge indirect costs other than through a cost allocation plan, Applicants thus must provide one of the following along with their budget: 1) A current federally approved indirect cost rate agreement; 2) A currently approved indirect cost rate agreement with DHHS; or 3) A calculation of *de minimis* indirect costs consistent with federal rules. DHHS may provide a calculator to aid programs in calculating *de minimis* indirect costs, upon request.

Indirect costs and cost allocation plans may also be negotiated after the Intent to Subaward. As consistent with law, Applicants may voluntarily opt to take a lower indirect rate than their approved agreement, or indirect cost calculation, allows.

Applicants may apply for up to \$25,000 in funding.

### **Allowable, Allocable, and Reasonable Costs**

Applicants are to include a Line Item Budget Worksheet (**Attachment C. Line Item Budget Worksheet Example**), Budget Narrative / Justification, Personnel Cost Worksheet (**Attachment E. Personnel Cost Worksheet Example**) or equivalent, and Indirect Cost Rate Agreement or De Minimis calculation (**Attachment F. De Minimis Calculator Example**) if requesting indirect cost; these items are collectively referred to as the overall Budget. These items should clearly demonstrate allowable, allocable, and reasonable costs in compliance with all applicable law and federal guidance, including but not limited to 45 CFR §§ 75 et seq., and identified program priorities and restrictions. Applicants are to submit the overall budget items that demonstrate an understanding of the administrative requirements of federal financial assistance.

The Budget should be thorough and clear enough to provide confidence that the proposed costs are relevant to the Work Plan.

### **Total Program Budget**

Applicants are to include a Total Program Budget that outlines the budget for the subaward, anticipated program income, and other support for a Total Program Budget as outlined in detail on **Attachment C. Line Item Budget Worksheet Example**.